

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BD

2010 JAN 19 AM 7:13

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Jack Drake

Political Party (if applicable)

Republican

Office Sought

House of Representative

District (If Senate or House)

57

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

727

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Shirley J. Drake
SIGNATURE OF PERSON FILING REPORT

712-778-2538
TELEPHONE

12-31-2009
DATE SIGNED

I AM FILING A December 31, 2009 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # ☒ 2

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 5,585.84

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

902.96

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 6,488.80

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

4,331.15

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 2,157.65

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

NONE

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND- RAISER INCOME
1-31-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		\$.46	<input type="checkbox"/>
2-28-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		.37	<input type="checkbox"/>
3-31-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		.35	<input type="checkbox"/>
4-30-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		.21	<input type="checkbox"/>
5-31-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		.21	<input type="checkbox"/>
6-30-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		.18	<input type="checkbox"/>
7-31-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		.18	<input type="checkbox"/>
8-12-09	ID# 6067 CK# 4016	Iowa Health 1775 - 90 th St. West Des Moines, IA. 50266		200.00	<input type="checkbox"/>
8-31-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		.19	<input type="checkbox"/>
9-24-09	ID# 6098 CK# 3643	Iowa Bev PAC 321 E. Walnut - STE 310 Des Moines IA. 50309		250.00	<input type="checkbox"/>
SUB-TOTAL				\$452.15	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9-30-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		\$.17	<input type="checkbox"/>
10-19-09	ID# CK# 5341	Union Pacific Corporation Fund 600 Thirteenth St. NW Ste 340 Washington, DC 20005		250.00	<input type="checkbox"/>
10-19-09	ID# 6058 CK# 4592	Iowa Chiropractic Society 100 East Grand Ave. Ste. 240 Des Moines, IA. 50309		100.00	<input type="checkbox"/>
10-31-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		.20	<input type="checkbox"/>
11-12-09	ID# 6484 CK# 1079	IA. Society of Anesthesiologists 525 SW 5th St. Ste. A Des Moines, IA. 50309		100.00	<input type="checkbox"/>
11-30-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		.21	<input type="checkbox"/>
12-31-09	ID# CK#	Rolling Hills Bank Box 588 Walnut, IA. 51577		.23	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$450.81	
TOTAL (if last page of this schedule)				\$902.96	

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(for Schedule A)

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1-12-09	ID# CK# 1301	Republican Party of Iowa 621 E. 9 th Des Moines, IA 50309	Contribution	\$ 365.00
1-12-09	ID# CK# 1302	Postmaster 608-4 th St. Griswold, IA 51535	100 - 42 Stamps	42.00
2-2-09	ID# CK# 1303	O P Printing 2610 Park Ave. Muscatine, IA 52761	Print Birthday Cards	423.15
2-9-09	ID# CK# 1304	IWCC Cass County Scholarship 705 Walnut Atlantic IA 50022	Scholarship Fund	225.00
3-19-09	ID# CK# 1305	House Majority Fund	Contribution	2,000.00
4-15-09	ID# CK# 1306	Iwcc Shelby County Scholarship 1210-7 th E Harlan, IA 51537	Scholarship Fund	260.00
5-6-09	ID# CK# 1307	Postmaster 608-4 th Street Griswold, IA 51535	150 - 42 Stamps	63.00
5-18-09	ID# CK# 1308	Harlan Newspaper 1114-7 th Street Harlan, IA 51537	2 yr. Subscription	78.00
SUB-TOTAL				\$ 3,456.15
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7-3-09	ID# CK# 1309	Hy Vee 1630 E. 7 th Atlantic, IA. 50022	3- ^{10.00} Beef Certificates	\$ 30.00
7-23-09	ID# CK# 1310	Hy Vee 1630 E. 7 th Atlantic, IA. 50022	3- ^{10.00} Beef Certificates	30.00
8-28-09	ID# CK# 1311	Harlan Newspaper 1114 - 7 th St. Harlan, IA. 51537	Sponsor Football ad	240.00
9-3-09	ID# CK# 1312	KJAN Radio Station North Olive St. Atlantic, IA. 50022	Sponsor Ad Tournament of Champ.	66.00
10-30-09	ID# CK# 1313	L I B State Capitol Des Moines, IA. 50309	Note cards	12.00
12-23-09	ID# CK# 1314	Danish Village Voice 4124 Main St. Elk Horn, IA 51531	One year Newspaper Subscription	26.00
12-30-09	ID# CK# 1315	Jack Drake 504 Adair Street Griswold, IA. 51535	Haul Antique Tractor to parades 411 miles @ \$1.00	411.00
12-30-09	ID# CK# 1316	KJAN North Olive Street Atlantic, IA. 50022	Christmas Ads	60.00
SUB-TOTAL				\$ 875.00
TOTAL (if last page of this schedule)				\$ 4331.15

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)